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ATTORNEYS AT LAW

Date/Time:

3176845173

June 1, 2006

JUN 0 1 2006 Ryan O. White 2700 First Indiana Plaza 135 North Pennsylvania Street Indianapolis, IN 46204 Direct Dial: (317) 684-5451 Fax: (317) 223-5173 E-Mail:white@boselaw.com

FAX TRANSMITTAL SHEET

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Certificate Under 37 C.F.R.§ 1.8(a)

June 1, 2006

June 1, 2006

I hereby certify that this correspondence is being transmitted to (571) 273-8300 at the United States Patent and Trademark Office at Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

2700 First Indiana Plaza 135 North Pennsylvania Streat Indianapolis, Indiana 46204

PATENT APPLICATION

Applicant:

Menkedick, Douglas J. et al.

3176845173

Serial No.:

10/657,696

Filing Date:

September 8, 2003

Title:

HOSPITAL BED

Group: 3673

Examiner:

Santos, R.

Atty. Docket:

8266-0880

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a preliminary amendment and response in the above-identified application:

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEB	
TOTAL CLAIMS (37 C.F.R. 1.16(e))	49	50	0	\$50	\$0	
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	6	7	0	\$200	\$0	
If applicant has small entity status under 37 C.F.R 1.9 and 1.27, then divide total fee by 2, and enter amount here, SMALL ENTITY TOTAL					\$0	
TOTAL FEE FOR ADDITIONAL CLAIMS					\$0	

^{*}If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

An Extension of Time for month(s) is hereby requested under 37 C.F.R. 1.138(a). The required fee for filing this extension is:	
TOTAL FEE FOR THIS AMENDMENT	\$0.00
A check in the amount of \$ to cover the total fee for this amendment is attached.	

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.

Attorney of Record

Printed Name: Ryan O. White, Reg. No. 45,541

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JUN 0 1 2006

BOSE McKINNEY & EVANS LLP

CUSTOMER NUMBER 25267

2700 First Indiana Plaza 135 North Pennsylvanin Street Indianapolis, Indiana 46204 (317) 684-5000

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group:	3673	}			
Atty. Docket:	8266-0880	Certificate Under 37 C.F.R.§ 1.8(a)			
Applicants:	Menkedick et al.	I hereby certify that this correspondence is being transmitted to (571) 273-8300 at the United States Paten and Trademark Office at Mail Stop Amendment			
Invention:	HOSPITAL BED	Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Serial No.:	10/657,696	June 1, 2006			
Filest	5eprember 8, 2003	Var Schodrowsk			
Examiner:	Santos, Robert G.	} Dated: <u>June 1, 2006</u>			

I'RELIMINARY AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT

Mail Enop Amendanual Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dem Oir.

In response to the Communication desired leaves, 2000, and principles on the merita, please amend the above-identified application as follows:

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Ramarks begin on pugo 2 of this paper